PTO/SB/05 (08-03)

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#### UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.		
First Inventor	NABIL N.	
Title	Interactive	Play Device

(Only for new non	provisional applications under er artt 1:00(5))	Express Mail Laber No.		
	PLICATION ELEMENTS 600 concerning utility patent application contents.	ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450	
2. (Submit an original Applicant claims See 37 CFR Specification		Computer Progr 8. Nucleotide and/or A (if applicable, all nec	mino Acid Sequence Submission	on .
- Descriptive til - Cross Refere - Statement Re - Reference to or a compute - Background o	tle of the invention ince to Related Applications egarding Fed sponsored R & D sequence listing, a table, r program listing appendix of the Invention		ion Sequence Listing on:  ROM or CD-R (2 copies); or  er	
	ry of the Invention	c. Statemer	its verifying identity of above co	opies
- Brief Descrip - Detailed Des	tion of the Drawings (if filed) cription	ACCOMPANI	YING APPLICATION PA	RTS
- Claim(s)		ACCOMPAN	TING APPLICATION I	
- Abstract of th	35 U.S.C. 113) [Total Sheets <u>4</u> り]	10. 37 CFR 3.73(	Papers (cover sheet & documer b) Statement Power S an assignee)	rof [
5. Oath or Declaratio		11. English Trans 12. Information D	lation Document (if applicable)	s of IDS
b. Copy fron (for contin	n a prior application (37 CFR 1.63(d)) nuation/divisional with Box 18 completed)	13. Preliminary A		
	TION OF INVENTOR(S)	15. Certified Cop	y of Priority Document(s)	ŀ
	statement attached deleting inventor(s)	(if foreign price	ority is claimed)	, <u>,</u>
1.63(d)	in the prior application, see 37 CFR )(2) and 1.33(b).	16. Nonpublication (b)(2)(B)(i). A cor its equivalent	on Request under 35 U.S.C. 12 pplicant must attach form PTO ent.	/SB/35
6. Application	Data Sheet. See 37 CFR 1.76		• • • • • • • • • • • • • • • • • • • •	
18. If a CONTINUING specification following	G APPLICATION, check appropriate box, and su g the title, or in an Application Data Sheet under	3/ CFR 1./6:		1
Continuation	Divisional Continu	ation-in-part (CIP) of p	rior application No.: . D.9./6.1.	ري <u></u>
Prior application information: Examiner John L., Sofonnayov Art Unit:				
	19. CORRESPON	IDENCE ADDRESS		
Customer N	umber:	OR	Correspondence address	s below
Name 1	Dr. Nabil N. GHALY			
Address 14 Longwood Drive				
City (	outh Huntington	State 1/lw 9	ork Zip Code	11+46
Country	USA	Telephone (631) 54	19-0980 Fax (63	1)549-0136
Name (Print/Type)	NABIL GHALY,	Registration No. (Attorn	ey/Agent)	
Signature	Majoral	>	Date 9/	15/03
			the state of the s	o file (and by the

This collection of information is required by 37 CFR 1.57(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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# **FEE TRANSMITTAL** for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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С	mplete if Known	
Application Number		
Filing Date		
First Named Inventor	NABIL	N. GHALY
Examiner Name		
Art Unit		
Attorney Docket No.		

METHOD OF PAYMENT (check all that apply)  Check Credit card Money Other None Order  Deposit Account:  Deposit Account Number Deposit Account Number Deposit Account Name  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)  The Director is authorized to: (check all that apply)			
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Deposit Account Number Deposit Account Name  The Director is authorized to: (check all that apply)  Code (\$) Code (\$)  1051 130 2051 65 Surcharge - late filing fee or oath 1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet 1053 130 Non-English specification 1812 2,520 1812 2,520 For filing a request for ex parte reexamination			
Deposit Account Number Deposit Account Name  The Director is authorized to: (check all that apply)  Deposit Account Name  Code (s)  Code			
Number Deposit Account Name  The Director is authorized to: (check all that apply)  1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet  1053 130 1053 130 Non-English specification  1812 2,520 1812 2,520 For filing a request for ex parte reexamination			
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The Director is authorized to: (check all that apply)  1812 2,520   1812 2,520   For filling a request for ex parte reexamination			
Charge fee(s) indicated below Credit any overpayments  1804 920* Requesting publication of SIR prior to			
Charge any additional fee(s) during the pendency of this application			
Charge fee(s) indicated below, except for the filing fee 1805 1,840* Requesting publication of SIR after Examiner action			
to the above-identified deposit account.  1251 110 2251 55 Extension for reply within first month			
FEE CALCULATION 1252 410 2252 205 Extension for reply within second month			
1. BASIC FILING FEE 1253 930 2253 465 Extension for reply within third month			
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid 1254 1,450 2254 725 Extension for reply within fourth month			
Code (\$) Code (\$) 1255 1,970 2255 985 Extension for reply within fifth month			
1001 750 2001 375 Utility filing fee 375 1401 320 2401 160 Notice of Appeal			
1002 330 2002 165 Design filing fee 1402 320 2402 160 Filing a brief in support of an appeal			
1003 520 2003 260 Plant filing fee 1403 280 2403 140 Request for oral hearing			
1004 750 2004 375 Reissue filing fee 1451 1,510 1451 1,510 Petition to institute a public use proceeding			
1005 160 2005 80 Provisional liling lee 110 2452 55 Petition to revive - unavoidable			
SUBTOTAL (1) (\$) 375.00 1452 110 2452 650 Petition to revive - unintentional			
2 FXTRA CLAIM FEES FOR UTILITY AND REISSUE 1501 1.300 2501 650 Utility issue fee (or reissue)			
Extra Claims Fee Paid 1502 470 2502 235 Design issue fee			
Total Claims 61 -20** = 41 x 9 = 369   1503 630   2503 315 Plant issue fee			
Independent 4 - 3** = 1 X 42 = 42 1460 130 Petitions to the Commissioner			
Multiple Dependent 1807 50 1807 50 Processing fee under 37 CFR 1.17(q)			
Large Entity   Small Entity   1806 180 Submission of Information Disclosure Stmt			
Large Entity   Small Entity   Fee Fee Fee Fee Pee Fee Description   8021   40			
1202 18 2202 9 Claims in excess of 20 1809 750 2809 375 Filing a submission after final rejection			
1201 84 2201 42 Independent claims in excess of 3 (37 CFR 1.129(a))			
1201 64 2201 42 2201 4			
1204 84 2204 42 ** Reissue independent claims aver original patent 1801 750 2801 375 Request for Continued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 1802 900 Request for expedited examination of a design application ——			
Other fee (specify)			
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)			
(Complete (if applicable))			

Registration No. Telephone (6 N.IGHAL (Attorney/Agent) Name (Print/Type) Signature

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

> Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

BIL N. GHALY Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

DR. NABIL N. GHALY 14 Longwood Drive S. Huntington, NY 11746 (631) 498-0980

September 15, 2003

Commissioner for Patents Patent and Trademark Office P.O. Box 1450 Alexandria, VA 22313-1450

## Ref.: Divisional Application for Interactive Play Device

Dear Commissioner:

Transmitted herewith for filing is the Divisional patent application of the undersigned, Dr. Nabil N. Ghaly, entitled "Interactive Play Device."

Also attached is a detailed list that identifies each type of document and the number of pages of each document submitted. Please acknowledge receipt of the attached documents by stamping the attached "DETAILED LIST OF DOCUMENTS TRANSMITTED TO PTO" with both the receipt date and application number and by transmitting same to the undersigned in the annexed self addressed prepaid envelope.

I am also attaching a credit card payment form in the amount of \$462.00 for the filing fees of this divisional application. I am claiming small entity status. Thank you for your cooperation and assistance in this matter.

Dr. Nabil N. Ghaly

Attach.

Certified mail 7002 2410 0001 6125 3387 Return receipt requested

#### **DETAILED LIST OF DOCUMENTS TRANSMITTED TO PTO**

TITLE OF INVENTION:

Interactive Play Device

NAME OF INVENTOR:

Dr. Nabil N. Ghaly

ADDRESS OF INVENTOR:

14 Longwood Drive

South Huntington, New York 11746

(631) 549-0980

DESCRIPTION OF DOCUMENT	NUMBER OF PAGES
Declaration For Utility or Design Patent Application (37 CFR 1.63) - Form PTO/SB/01 (08-03)	2
Copy of Declaration For Utility or Design Patent Application (37 CFR 1.63), from a prior application filed on July 6, 2000 (for divisional application) - Form PTO/SB/01 (12-97)	2
Utility Patent Application Transmittal (37 CFR 1.53(b)) - Form PTO/SB/05 (08-03)	1
Assertion of Small Entity Status (37 CFR 1.27)	1
Fee Transmittal For FY 2003- Form PTO/SB/17 (08/03)	1
Specification excluding claims	35
Total Number of Claims: 61	8
Abstract of the Disclosure	1
Number of Figures of Drawings: 48	40
Credit Card Payment Form – PTO-2038 (02-2003)	1
Amount of Payment Enclosed: \$786.00	1
Certificate of Mailing Under 37 CFR 1.8 – Form PTO/SB/92 (08-03)	1

Dated: September 15, 2003

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Interactive Play Device

NAME OF INVENTOR:

Dr. Nabil N. Ghaly

ADDRESS OF INVENTOR:

14 Longwood Drive

South Huntington, New York 11746

(631) 549-0980

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Dated: September 15, 2003